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SEP 08 2004

PTO/SB/01 (12-97)

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Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input type="checkbox"/> Declaration Submitted with Initial Filing <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16(e)) required) OR	Attorney Docket Number	29912-719.201
	First Named Inventor	Mathis
	COMPLETE IF KNOWN	
	Application Number	10/840,188
	Filing Date	May 5, 2004
	Group Art Unit	3732
	Confirmation No.	7264
	Examiner Name	Not Yet Assigned

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

DEVICE AND METHOD FOR MODIFYING THE SHAPE OF A BODY ORGAN

(Title of the Invention)

the specification of which
☐ is attached hereto
OR

☒ was filed on (MM/DD/YYYY)

05/05/2004

as United States Application Number or PCT International

Application Number 10/840,188 and was amended on (MM/DD/YYYY) ☐ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
			<input type="checkbox"/>	YES <input type="checkbox"/>	NO <input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(h) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto.

(Page 1 of 2)

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.

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U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

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As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: ☒ Customer Number 021971 →

OR

☐ Registered practitioner(s) name/registration number listed below

Place Customer
Number Bar
Code Label here

Name	Registration Number	Name	Registration Number

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☒ Customer Number or Bar Code Label 021971 OR ☐ Correspondence address below

Name	James R. Shay				
Address	Wilson Sonsini Goodrich & Rosati				
Address	650 Page Mill Road				
City	Palo Alto	State	CA	ZIP	94304
Country	U.S.	Telephone	650-493-9300		Fax 650-493-6811

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))				Family Name or Surname			
Mark L.				Mathis			
Inventor's Signature						Date	
Residence: City	Fremont	State	CA	Country	USA	Citizenship	USA
Post Office Address	44619 Parkmeadow Drive						
Post Office Address	Fremont, CA 94539						
City	Fremont	State	CA	ZIP	94539	Country	USA

☒ Additional inventors are being named on the 2 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto:

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PTO/SB/02A (3-97)

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>1</u> of <u>2</u>
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Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
David				Reuter			
Inventor's Signature						Date	
Residence: City	Bothell	State	WA	Country	USA	Citizenship	USA
Post Office Address	3225 208th Place SE						
Post Office Address	Bothell, WA 98021						
City	Bothell	State	WA	ZIP	98021	Country	USA
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Lucas				Gordon			
Inventor's Signature						Date	
City	Vashon	State	WA	Country	USA	Citizenship	USA
Post Office Address	25713 Gold Beach Dr. SW						
Post Office Address	Vashon, WA 98070						
City	USA	State	CA	ZIP	98070	Country	USA
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Cruz				Beeson			
Inventor's Signature						Date	
City	Sacramento	State	CA	Country	USA	Citizenship	USA
Post Office Address	1562 Response Rd. Apt 1110						
Post Office Address	Sacramento, CA 95815						
City	USA	State	CA	ZIP	95815	Country	USA

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>2</u> of <u>2</u>
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Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Garrett				Beget			
Inventor's Signature				Date			
Residence: City	Bothell	State	WA	Country	USA	Citizenship	USA
Post Office Address		12114 NE 171 st Place F104					
Post Office Address		Bothell, WA 98011					
City	Bothell	State	WA	ZIP	98011	Country	USA
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Frederick				Stewart			
Inventor's Signature				Date			
City	Bellevue	State	WA	Country	USA	Citizenship	USA
Post Office Address		5803 153 rd Ave SE					
Post Office Address		Bellevue, WA 98006					
City	USA	State	CA	ZIP	98006	Country	USA
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
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City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		ZIP		Country	

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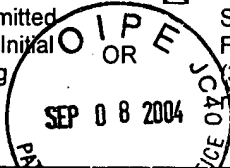


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OR

☐ Registered practitioner(s) name/registration number listed below

Place Customer
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Code Label here

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021971

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Address	650 Page Mill Road				
City	Palo Alto	State	CA	ZIP	94304
Country	U.S.	Telephone	650-493-9300		Fax 650-493-6811

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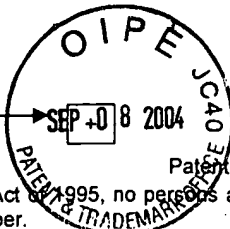
Name of Sole or First Inventor:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))		Family Name or Surname	
Mark L.		Mathis	
Inventor's Signature			Date
Residence: City	Fremont	State	CA
		Country	USA
Post Office Address	44619 Parkmeadow Drive		
Post Office Address	Fremont, CA 94539		
City	Fremont	State	CA
		ZIP	94539
		Country	USA

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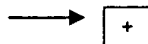
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Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle (if any))				Family Name or Surname				
David				Reuter				
Inventor's Signature					Date		8/5/04	
Residence: City	Bothell	State	WA	Country	USA	Citizenship	USA	
Post Office Address		3225 208th Place SE						
Post Office Address		Bothell, WA 98021						
City	Bothell	State	WA	ZIP	98021	Country	USA	
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Lucas				Gordon				
Inventor's Signature					Date			
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Post Office Address		Vashon, WA 98070						
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Given Name (first and middle (if any))				Family Name or Surname			
Garrett				Beget			
Inventor's Signature						Date	
Residence: City	Bothell	State	WA	Country	USA	Citizenship	USA
Post Office Address		12114 NE 171 st Place F104					
Post Office Address		Bothell, WA 98011					
City	Bothell	State	WA	ZIP	98011	Country	USA
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Post Office Address		Bellevue, WA 98006					
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Inventor's Signature						Date	
City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		ZIP		Country	

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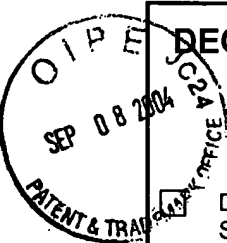


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OR

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Attorney Docket Number

29912-719.201

First Named Inventor

Mathis

COMPLETE IF KNOWN

Application Number

10/840,188

Filing Date

May 5, 2004

Group Art Unit

3732

Confirmation No.

7264

Examiner Name

Not Yet Assigned

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			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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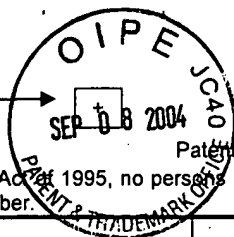
Name	James R. Shay				
Address	Wilson Sonsini Goodrich & Rosati				
Address	650 Page Mill Road				
City	Palo Alto	State	CA	ZIP	94304
Country	U.S.	Telephone	650-493-9300	Fax	650-493-6811

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Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
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Mark L.			Mathis		
Inventor's Signature					Date
Residence: City	Fremont	State	CA	Country	USA
				Citizenship	USA
Post Office Address	44619 Parkmeadow Drive				
Post Office Address	Fremont, CA 94539				
City	Fremont	State	CA	ZIP	94539
				Country	USA

☒ Additional inventors are being named on the 2 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto:

Please Type a plus sign (+) inside this box



PTO/SB/02A (3-97)

Approved for use through 9/30/98, OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>1</u> of <u>2</u>
--------------------	---

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname					
David				Reuter					
Inventor's Signature					Date				
Residence: City		Bothell		State		WA		Country	
						USA		Citizenship	
								USA	
Post Office Address		3225 208th Place SE							
Post Office Address		Bothell, WA 98021							
City		Bothell		State		WA		ZIP	
						98021		Country	
								USA	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname					
Lucas				Gordon					
Inventor's Signature		<i>Lucas Gordon</i>			Date		8/2/04		
City		Vashon		State		WA		Country	
						USA		Citizenship	
								USA	
Post Office Address		25713 Gold Beach Dr. SW							
Post Office Address		Vashon, WA 98070							
City		USA		State		CA		ZIP	
						98070		Country	
								USA	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname					
Cruz				Beeson					
Inventor's Signature					Date				
City		Sacramento		State		CA		Country	
						USA		Citizenship	
								USA	
Post Office Address		1562 Response Rd. Apt 1110							
Post Office Address		Sacramento, CA 95815							
City		USA		State		CA		ZIP	
						95815		Country	
								USA	

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Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
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Garrett				Beget			
Inventor's Signature					Date		
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Frederick				Stewart			
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Post Office Address							
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PTO/SB/01 (12-97)

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Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☐ Declaration Submitted with Initial Filing ☒ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16(e)) required) OR

Attorney Docket Number 29912-719.201

First Named Inventor Mathis

COMPLETE IF KNOWN

Application Number 10/840,188

Filing Date May 5, 2004

Group Art Unit 3732

Confirmation No. 7264

Examiner Name Not Yet Assigned

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

DEVICE AND METHOD FOR MODIFYING THE SHAPE OF A BODY ORGAN

(Title of the Invention)

the specification of which

☐ is attached hereto
OR

☒ was filed on (MM/DD/YYYY)

05/05/2004

as United States Application Number or PCT International

Application Number 10/840,188 and was amended on (MM/DD/YYYY) ☐ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
			<input type="checkbox"/>	YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>


☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(h) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto.

(Page 1 of 2)

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PTO/SB/01 (12-97)

Approved for use through 9/30/00.OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of the application is not designated in the prior United States or PCT international application in the manner provided by the first paragraph of 31 U.S.C. 112. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: ☒ Customer Number 021971 

OR

☐ Registered practitioner(s) name/registration number listed below

Place Customer
Number Bar
Code Label here

Name	Registration Number	Name	Registration Number

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☒ Customer Number 021971 OR ☐ Correspondence address below

Name	James R. Shay						
Address	Wilson Sonsini Goodrich & Rosati						
Address	650 Page Mill Road						
City	Palo Alto	State	CA	ZIP	94304		
Country	U.S.	Telephone	650-493-9300		Fax	650-493-6811	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))				Family Name or Surname			
Mark L.				Mathis			
Inventor's Signature						Date	
Residence: City	Fremont	State	CA	Country	USA	Citizenship	USA
Post Office Address	44619 Parkmeadow Drive						
Post Office Address	Fremont, CA 94539						
City	Fremont	State	CA	ZIP	94539	Country	USA

☒ Additional inventors are being named on the 2 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto:

Please Type a plus sign (+) inside this box +

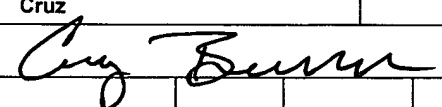
PTO/SB/02A (3-97)

Approved for use through 9/30/98, OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>1</u> of <u>2</u>
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Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
David				Reuter			
Inventor's Signature						Date	
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Lucas				Gordon			
Inventor's Signature						Date	
City	Vashon	State	WA	Country	USA	Citizenship	USA
Post Office Address		25713 Gold Beach Dr. SW					
Post Office Address		Vashon, WA 98070					
City	USA	State	CA	ZIP	98070	Country	USA
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
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Cruz				Beeson			
Inventor's Signature						Date	
City	Sacramento	State	CA	Country	USA	Citizenship	USA
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Post Office Address		Sacramento, CA 95815					
City	USA	State	CA	ZIP	95815	Country	USA

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PTO/SB/02A (3-97)

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>2</u> of <u>2</u>
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Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Garrett				Beget			
Inventor's Signature						Date	
Residence: City	Bothell	State	WA	Country	USA	Citizenship	USA
Post Office Address		12114 NE 171 st Place F104					
Post Office Address		Bothell, WA 98011					
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Frederick				Stewart			
Inventor's Signature						Date	
City	Bellevue	State	WA	Country	USA	Citizenship	USA
Post Office Address		5803 153 rd Ave SE					
Post Office Address		Bellevue, WA 98006					
City	USA	State	CA	ZIP	98006	Country	USA
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Inventor's Signature						Date	
City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		ZIP		Country	

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Please type a plus sign (+) inside this box

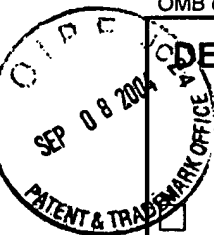


PTO/SB/01 (12-97)

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☐ Declaration Submitted with Initial Filing
OR
☒ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16(e)) required)

Attorney Docket Number 29912-719.201

First Named Inventor Mathis

COMPLETE IF KNOWN

Application Number 10/840,188

Filing Date May 5, 2004

Group Art Unit 3732

Confirmation No. 7264

Examiner Name Not Yet Assigned

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

DEVICE AND METHOD FOR MODIFYING THE SHAPE OF A BODY ORGAN

(Title of the Invention)

the specification of which

☐ is attached hereto
OR

☒ was filed on (MM/DD/YYYY)

05/05/2004

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I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

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I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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
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As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: ☒ Customer Number 021971 

OR

☐ Registered practitioner(s) name/registration number listed below

Place Customer
Number Bar
Code Label here

Name	Registration Number	Name	Registration Number

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☒ Customer Number or Bar Code Label 021971 OR ☐ Correspondence address below

Name	James R. Shay					
Address	Wilson Sonsini Goodrich & Rosati					
Address	650 Page Mill Road					
City	Palo Alto	State	CA	ZIP	94304	
Country	U.S.	Telephone	650-493-9300		Fax	650-493-6811

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

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Inventor's Signature						Date	
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Given Name (first and middle (if any))				Family Name or Surname				
Garrett				Beget				
Inventor's Signature					Date		8/2/04	
Residence: City		Bothell	State	WA	Country	USA	Citizenship USA	
Post Office Address		12114 NE 171 st Place F104						
Post Office Address		Bothell, WA 98011						
City		Bothell	State	WA	ZIP	98011	Country USA	
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City			State		Country		Citizenship 	
Post Office Address								
Post Office Address								
City			State		ZIP		Country 	

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First Named Inventor Mathis

COMPLETE IF KNOWN

Application Number 10/840,188

Filing Date May 5, 2004

Group Art Unit 3732

Confirmation No. 7264

Examiner Name Not Yet Assigned

As a below named Inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

DEVICE AND METHOD FOR MODIFYING THE SHAPE OF A BODY ORGAN

(Title of the Invention)

the specification of which
☐ is attached hereto
OR

☒ was filed on (MM/DD/YYYY) 05/05/2004 as United States Application Number or PCT International

Application Number 10/840,188 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
			<input type="checkbox"/>	YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(h) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto.

(Page 1 of 2)

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.

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PTO/SB/01 (12-97)

Approved for use through 9/30/00. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE


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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of the application is not designated in the prior United States or PCT international application in the manner provided by the first paragraph of 31 U.S.C. 112. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: ☒ Customer Number 021971 

OR

☐ Registered practitioner(s) name/registration number listed below

Place Customer
Number Bar
Code Label here

Name	Registration Number	Name	Registration Number

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☒ Customer Number 021971 OR ☐ Correspondence address below

Name	James R. Shay						
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
Mark L.				Mathis			
Inventor's Signature						Date	
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City	Fremont	State	CA	ZIP	94539	Country	USA

☒ Additional inventors are being named on the 2 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto:

Please Type a plus sign (+) inside this box



PTO/SB/02A (3-97)

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>1</u> of <u>2</u>
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Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle (if any))				Family Name or Surname				
David				Reuter				
Inventor's Signature					Date			
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Inventor's Signature					Date			
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Inventor's Signature					Date			
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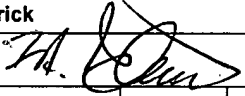
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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>2</u> of <u>2</u>
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Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor				
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Garrett				Beget				
Inventor's Signature					Date			
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City	Bothell	State	WA	ZIP	98011	Country	USA	
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Inventor's Signature					Date		8/13/04	
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City	USA	State	CA	ZIP	98006	Country	USA	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle (if any))				Family Name or Surname				
Inventor's Signature					Date			
City		State		Country		Citizenship		
Post Office Address								
Post Office Address								
City		State		ZIP		Country		

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